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## I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). I hereby appoint: Practitioners associated with the Customer Number: 26389 Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used): Registration Number Number as attorney(s) or agent(s) to represent the undersigned before the United States Petent and Trademark Office (USPTO) in connection with any and all patent applications assigned <u>only</u> to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CPR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to: 1 26389 The address essociated with Customer Number: OR Firm or Individual Name Address City Country Telephone Email Assignee Name and Address: Merck Sharp & Dohme Corp. 126 East Lincoln Avenue Rahway, New Jersey 07065 A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must Identify the application in which this Power of Attorney is to be filed. SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignce Date 03/02/2010 Sionature Edward M. Yoshida Telephone 206.273-7877 Name Title Managing Counsel

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